## LOCAL ENFORCEMENT AGENCY GRANT APPLICATION July 1, 2006 to June 30, 2007 EA17 Grant Cycle

Local Enforcement Agency (LEA)		
Address		
City	State	Zip
Name & Title of Program Director		
Phone	e-mail	
Name of Finance Officer	_	
Phone	e-mail	
Name of Program Manager		
Phone	e-mail	
FAX		
Primary Contact Person		
<ul><li>2. A Resolution from the local go to execute all grant-related doc person is the signature that will</li></ul>	verning body that designments for your jurisdides be accepted on grant-cipating jurisdictions, apating jurisdiction.	gnates the position of the person authorized iction. The signature of the authorized related documents. A Resolution for a and be accompanied by a letter of
<u>.</u>	=	itted for the CIWMB's consideration for the owledge and belief.
Printed Name of Authorized Person		
Title (authorized in resolution)		
Phone	e-mail	
Signature		Date

## **ENVIRONMENTAL JUSTICE**

\_\_\_\_\_\_Applicant certifies that, if awarded a grant, applicant shall, in the performance of the grant agreement, conduct its programs, policies and activities that substantially affect human health or the environment in a manner that ensures the fair treatment of people of all races, cultures, and income levels, including minority populations and low income populations of the State. (Authorized signator please initial)